

East Manchester Township HIGHWAY OCCUPANCY APPLICATION

Application Date: _____

Applicant/Company: _____ Telephone #: _____

Address/City/State/Zip: _____

GENERAL APPLICABLE DATA

Road(s)/Address: _____ Twp/State Rd. No. _____

Description of work: _____

Approx. Date Work Start(ed): _____ / _____ / _____ Completed: _____ / _____ / _____

Check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> New | <input type="checkbox"/> Shoulder Opening |
| <input type="checkbox"/> Repair | <input type="checkbox"/> Pavement Opening |
| <input type="checkbox"/> Repave | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Sidewalk/Curb | |

Is the road along which the proposed work: Paved _____ Curbed _____ Sidewalk _____

Road surface is improved to width of _____ feet. Right-of-Way _____ feet.

POLES AND TOWER

Number of poles to be erected _____.

Distance from center line _____ feet.

Distance of proposed work along the road _____ feet.

PIPE LINES AND CONDUITS

Approximate area of openings on improved surface _____ sq. feet.

Approximate area of openings on unimproved part _____ sq. feet.

Length of trench _____ feet. Depth of trench _____ inches.

CONTRACTOR INFORMATION

Name: _____

Address: _____ Telephone #: _____

Person in charge of work: _____ Telephone #: _____

Note: An updated Certificate of Insurance must be on file with East Manchester Twp.

OFFICE USE ONLY:

Schedule Item No.: _____

Unit Fee: \$ _____ \$ _____ \$ _____

Number of Units: _____

TOTAL: \$ _____ \$ _____ \$ _____

GRAND TOTAL FEE: \$ _____

The applicant is: ___ an individual ___ corporation

(Signature of Applicant)

(Executive Officer or Authorized Representative)

CONTACT EAST MANCHESTER TOWNSHIP AT 717-266-4279 OR 717-577-2505 AT LEAST 24HRS BEFORE THE WORK IS TO BEGIN FOR A PRE-CONSTRUCTION MEETING. WORK MUST COMPLY WITH PENNDOT 408 AND ALL APPLICABLE TWP CODES, ORDINANCES AND CONSTRUCTION AND MATERIAL SPECIFICATIONS.

INSTRUCTIONS:

- Any work performed within the right-of-way of a township road, requires:
 - Three (3) copies of this form
 - Three (3) copies of a sketch showing location and details of proposed work *****PLEASE BE CLEAR WITH SCOPE OF WORK ON SKETCH*****
 - Certificate of Liability for the contractor

FESS:

PLEASE SEE THE FEE SCHEDULE AT

<http://emanchestertwp.com/wp-content/uploads/2021/01/2021-Fee-Schedule.pdf>